

South Dakota Board of Nursing

South Dakota Department of Health
722 Main Street, Suite 3; Spearfish, SD 57783
(605) 642-1388; Fax: (605)642-1389; www.state.sd.us/doh/nursing

Nurse Aide Application for Re-Approval of Training Program

All Nurse Aide (NA) Training Programs In South Dakota must be approved by the South Dakota Board of Nursing pursuant to ARSD 44:04:18:15. Approval status is granted for a two-year period. Written approval or denial of approval will be issued within 90 days after receipt of the application. Send completed application and supporting documentation to:

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Name of Institution: Rosebud Country Care Center	
Address: 400 Park Ave	
Gregory SD 57533	
Phone Number: 605 835 8296 Fax Number: 605 835 8313	
E-mail Address of Faculty: roxanne, ahlers @ overa, org	Please send
carla. Warnke @avera. org	- Chy Cotresponders
Select option(s) for Re-Approval: Request re-approval without changes to program coordinator, primary instructor, supplemental personnel or curriculum 1. List personnel and licensure information 2. Complete evaluation of the curriculum Request re-approval with faculty changes and/or curriculum changes 1. List personnel and licensure information, attach curriculum vitas, resumes, or work history for new personnel	

List Personnel and Licensure Information:

3. Submit documentation to support requested curriculum changes

2. Complete evaluation of the curriculum

Program Coordinator must be a registered nurse with 2 years nursing experience, at least one of which is in the provision of long-term care services. The Director of Nursing (DON) may serve simultaneously as the program coordinator but may not perform training while serving as DON. (ARSD 44:04:18:10)

tate	Number	Expiration Date	Verification (Completed by SDBON)
Z	R030441	4-24-2014	Carlo Can
2	N	N R030441	

<u>Primary Instructor</u> must be a licensed nurse (RN or LPN) with 2 years nursing experience, at least one of which is in the provision of long-term care services. The primary instructor is the actual teacher of course material. (ARSD 44:04:18:11)

		RN OR LPN LICENSE				
Name of Primary Instructor	State	Number	Expiration Date	Verification (Completed by SDBON)		
Carla Warnke	RN	R030441	4-24-2014	(Athr)		

If requesting new Primary Instructor, attach curriculum vita, resume, or work history, and attach documentation supporting previous experience in teaching adults within the past five years or documentation of completing a course in the instruction of adults.

<u>Supplemental Personnel</u> may assist with Instruction, they must have one year of experience in their respective field of practice, i.e. additional licensed nurses, social worker, physical therapist. (ARSD 44:04:18:12) *If requesting new Supplemental Personnel*, attach curriculum vita, resume, or work history.

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	LICENSURE/REGISTRATION				
Supplemental Personnel & Credentials	State	Number	Expiration Date	Verification (Completed by SDBON)	
Jennifer Allmendinger	SO	R037394	5-17-14	Dolland	
J .				000	

2. Complete Evaluation of the Curriculum: Indicate compllance relative to each standard during the previous two years. Explain any "no" responses on a separate sheet of paper. (Pursuant to ARSD 44:04:18 07, the Department of Health may conduct an unannounced on-site visit to determine compliance with requirements.)

Standard	Yes	No
Program was no less than 75 hours.	~	
 Provided minimum 16 hours of instruction prior to students having direct patient contact. 	~	
 Provided minimum 16 hours of supervised practical instruction; Instructor ratio did not exceed 8 students for one instructor. 	/	
 Provided instruction on each content area (see ARSD 44:04:18:15): 	1	
Basic nursing skills	/	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Personal care skills	V	
Mental health and social services	1	***************************************
Care of cognitively impaired clients	V	***************************************
Basic restorative nursing services	V	
Residents' rights	V	
 Students did not perform any patient services until after the primary instructor found the student to be competent 	/	Medden
 Students only provided patient services under the supervision of a licensed nurse 	V	-
 Your agency maintains a 75% pass rate of students on the competency evaluation (written and skills exam taken through the SD Healthcare Association). 	/	

3. <u>S</u>	ubmit Documentation to Support Requested Curriculum Changes:
Name of (Course (if applicable): How To Be a Nurse Assistant
Instruction	of teaching methods may be utilized in achieving the classroom instruction such as independent study, video n, and online instruction. nit reference list of teaching materials utilized (include name of book or resource, publisher, publication date, etc).
☐ Behar ☐ Currio	commentation that supports requirements listed in ARSD 44:04:18:15, Including: viorally stated objectives with measurable performance criteria for each unit of curriculum culum, objectives and agenda documenting the requirements for the minimum 75 hour course as follows: A minimum of 16 hours of instruction prior to student having direct patient contact; the 16 hours must include: Communication and interpersonal skills, infection control, safety/emergency procedures, promoting residents' independence, respecting residents' rights. A minimum of 16 hours of supervised practical instruction with enough instructors to ensure safe and effective care; the instructor ratio may not exceed eight students for one instructor. Instruction in each of the following content areas (see ARSD 44:04:18:15 for more detail): Basic nursing skills (including documentation) including: vital signs; height and weight; client environment needs; recognizing abnormal changes in body functioning and the importance of reporting such changes to a supervisor; and caring for dying clients; Personal care skills, including: bathing; grooming, including mouth care; dressing; toileting; assisting with eating and hydration; feeding techniques; skin care; and transfers, positioning, and turning;



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	developmental tasks associated with aging	responding appropriately to behaviors; awareness of process; respecting personal choices and preserving client					
	dignity, and recognizing sources of emotion Care of cognitively impaired clients, including needs and behaviors:	nal support; ng: communication and techniques for addressing unique					
	Basic restorative nursing services, including eating, and dressing; range of motion; turn	g: self-care; use of assistive devices in transferring; ambulation, ning and positioning in bed and chair; bowel and bladder care					
	and training; and care and use of prosthetic and orthotic devices:						
Program Coor	dinator Signature: Cubunle	RN Date: 8-6-12					
This section to	be completed by the South Dakota Boa	rd of Nursing					
Date Applicatio	n Received: 81312	Date Application Denied: /					
Date Approved: Reason for Denial:							
Board Represer							
Date Notice Se	nt to Institution:						

October 20, 2011